## CITY OF TEMECHI A - COMMUNITY SERVICES DEPARTMENT

2021 SOFTBALL ADD/DROP FORM				
Manager's Name:				
I realize every precaution is taken to eliminate any injuries or hazards, and a competent supervisor is present; however, in the event of any injury, property damage, disability, death, sickness, or disease, I hereby waive, release and hold harmless from any liability for damages for personal injury including accidental death, sickness, or disease, as well as from claims for property damage which may arise in connection with the above named activity, the City of Temecula, its officers, agents, employees, volunteers and independent contractors. In case of accident or other emergency, personnel of the Community Services Department and/or its agents or independent contractors are hereby authorized to secure medical care deemed necessary as a result of accident or injury for the participant. I further agree to pay any and all costs incurred as a result of said treatment. I further permit the use of activity/event photography and/or video for media promotion.  1) A \$10.00 non-resident fee must be submitted with this form for each non-resident being added to a team. Add/Drop forms will not be accepted until the fees have been paid in full. All Add/Drops are non-refundable. Dropping a non-resident and adding another non-resident does not offset the \$10.00 non-resident fee.  2) A copy of each player's driver's license/photo I.D. and utility bill (for residence verification) must be submitted with the add/drop form before it will be accepted.  ~PLAYERS TO BE ADDED~				
Signature	Street Address	City	Zip Code	Phone #
~PLAYERS TO BE DROPPED~				
Name				
For CSD Use Only:				
Received by:	eceived by: Effective Date: Non-Resident:			
	e any injuries or hazards, and a competent supervisor or damages for personal injury including accidental ders, agents, employees, volunteers and independent coized to secure medical care deemed necessary as a resevent photography and/or video for media promotion dwith this form for each non-resident being added to-resident does not offset the \$10.00 non-resident fee.  I.D. and utility bill (for residence verification) must be sample.  Signature  PLAYER  APLAYER	Manager's Name:  any injuries or hazards, and a competent supervisor is present; however, in the event of any injury, proport damages for personal injury including accidental death, sickness, or disease, as well as from claims for press, agents, employees, volunteers and independent contractors. In case of accident or other emergency, prized to secure medical care deemed necessary as a result of accident or injury for the participant. I furthe event photography and/or video for media promotion.  In with this form for each non-resident being added to a team. Add/Drop forms will not be accepted until resident of the stress of	Manager's Name:  any injuries or hazards, and a competent supervisor is present; however, in the event of any injury, property damage, disability or damages for personal injury including accidental death, sickness, or disease, as well as from claims for property damage while ras, agents, employees, volunteers and independent contractors. In case of accident or other emergency, personal of the Commitzed to secure medical care deemed necessary as a result of accident or injury for the participant. I further agree to pay any and event this form for each non-resident being added to a team. Add/Drop forms will not be accepted until the fees have been paid resident does not offset the \$10.00 non-resident fee.  1.D. and utility bill (for residence verification) must be submitted with the add/drop form before it will be accepted.  **PLAYERS TO BE ADDED**  Signature  Street Address  City  **PLAYERS TO BE DROPPED**  **PLAYERS TO BE DROPPED**  For CSD Use Only:	Manager's Name:  any injuries or hazards, and a competent supervisor is present; however, in the event of any injury, property damage, disability, death, sickness, or disrages for personal injury including accidental death, sickness, or disease, as well as from claims for property damage which may arise in connections, agents, employees, volunteres and independent contractors. In case of accident or other emergency, personnel of the Community Services Departure ized to secure medical care deemed necessary as a result of accident or injury for the participant. I further agree to pay any and all costs incurred as a revent photography and/or video for media promotion.  4 with this form for each non-resident being added to a team. Add/Drop forms will not be accepted until the fees have been paid in full. All Add/Drops resident does not offset the \$1000 non-resident excepted.  **PLAYERS TO BE ADDED**  Signature  Street Address  City  Zip Code  **PLAYERS TO BE DROPPED**  **PLAYERS TO